·									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD)					
Effective October 1, 2003									10743930					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TO	TAL CLAIMS		9	9				E	FEE		RATE	FEE		
FO	R		MARKER	MAGER FILED		NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	770.00		
10	TAL CHARGEA	BLE CLAIMS	9 mi	9 minus 20=		•		XS 9=		ОЯ	X\$18=			
INDEPENDENT CLAIMS			l m	minus 3 =		•		X43-		OR	X86=			
MEU	LTIPLE CEPEN	DENT CLAIM	PRESENT	RESENT			1145=			OR	+290=			
• If the difference in column 1 is less than zero, enter *0" in column 2							TO	TOTAL 385		OR	TOTAL			
CLAIMS AS AMENDED - PART II											OTHER	THAN		
(Column 1) (Column 2) (Column 3)							SM	WL.	ENTITY	OR	SMALL	ENILLA		
NFA		CLAIMS REMAINING AFTER AMENDMENT		PREVI		PRESENT EXTRA	RA	IE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AENDMENT	Total	. []	Miras	- "	7	•	XS	9-		QB	-818×			
	Independent	•	Minus	***		•	X4	3 2		OR	X88=			
₹	FIRST PRESENTATION OF MULTIPLE I			PENDENT'CLAIM]	S-		OR	+290=			
• .							<u> </u>	TAL		1	TODAL			
								FEE	L	Jun	ADDIT. FEE			
_	(Column 1) (Column 2) (Column 5)								14004			ADOI-		
MT 8		REMADISMS AFTER AMENIMEN		PREVI	BER DUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	TIONAL		
MENDMENT B	Total .	. 35	Minus	 Z	Ø ·	-15		Ž	25.	ОЯ	X\$18=			
	tridependent	• 2	Minus	 2	5	1	×	3=		OR	X88=			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1.	5-	OF.	OR	+290=			
								OIAL		OR	ADDIT, FEE			
								FEE	1		·			
(Column 1) (Column 2) (Column 3)									LADO	1		ADD1-		
MTC	8-505	REMAINING AFTER AMENDMEN		PREV	ABER HOUSLY FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	TIONAL		
AMENDMENT	Total ·	. 36	Minus	- 3	35	/		<u>-</u>		OR	30\$18=			
	Independent	• 3	Minus		3	- /	×4	8=		OR	X88=	7		
Ľ	PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						7		 /	1		/		
								3- 004		OR	+290-	4		
I -	 If the entry is column 1 is less than the entry in column 2, write "O" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 								· ·	OR	ADDIT. FEE			
	"I the "Kighest M: The "Kighest M:		. 					the E	ppropriate bo	w in c	okoma 1.			

FORM PTO-675 (Red 1903)